

State of New Jersey
Department of Environmental Protection
(NJDEP)

INDUSTRIAL SITE RECOVERY ACT (ISRA)

REMEDIATION AGREEMENT APPLICATION

This application is to be used when requesting a Remediation Agreement from the Department to allow the ISRA triggering event to proceed prior to completing the standard ISRA administrative process. The Remediation Agreement specifies a time schedule for completion of ISRA requirements and necessitates the posting of a remediation funding source.

Please note that the remediation funding source amount must be based on an accurate remedial cost estimate. If a completed Preliminary Assessment and as necessary Site Investigation/Remedial Investigation documentation and cost estimate is not submitted with the Remediation Agreement, \$100,000.00 is generally the minimum acceptable amount, in lieu of a specific remedial cost estimate. This minimum amount would need to be increased based on the complexity and number of areas of concern. As the case progresses through the Preliminary Assessment/Site Investigation /Remedial Investigation/ Remedial Action, the remediation funding source amount should be decreased or increase as documented by the investigation.

This application must be completed by the owner or operator of the industrial establishment and submitted with a certified check, attorney check, Money Order or a personal check (if received sixty (60) days prior to the issuance of the Remediation Agreement), made payable to "Treasurer, State of New Jersey", in the amount of \$1000.00 or \$500.00 for an amendment. The application should be delivered to the following address:

New Jersey Department of Environmental Protection
Division of Remediation Support
Oversight Resources Allocation Element
Office of Accountability
401 East State Street, 5th Floor West
P.O. Box 028
Trenton, NJ 08625
FAX: (609)633-1439

Should you encounter any problem in completing this form, we recommend that, you discuss this matter with a representative from the Office of Accountability. Submitting incorrect or insufficient application may cause processing delays and possible postponement of your transaction.

If you require assistance with this application, please call (609) 292-4665 between the hours of 8:00 a.m. and 5:00 p.m.

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF REMEDIATION SUPPORT
OVERSIGHT RESOURCES ALLOCATION ELEMENT
401 EAST STATE STREET, 5TH FLOOR
P.O. BOX 028
TRENTON, NJ 08625-0028

REMEDIATION AGREEMENT APPLICATION

PLEASE TYPE OR PRINT

Date _____

1. Industrial Establishment(s)

(Attach additional sheets if there is more than one to be included in this Remediation Agreement.)

Name _____ Telephone# _____

Street Address _____

City or Town _____ State _____ Zip Code _____

Municipality _____ County _____

Tax Block Number(s) _____ Tax Lot Number(s) _____

State of Incorporation, if applicable: _____

Standard Industrial Classification (SIC) Number: _____

2. Has a General Information Notice (GIN) been filed for this transaction?

If yes, ISRA Case number # _____

If **no**, attach a completed GIN to this application.

3. Current Property Owner(s) (Attach additional sheets if more than one.)

Name _____ Telephone #() _____

Firm _____

Street Address _____

Municipality _____ State _____ Zip Code _____

State of Incorporation, if applicable: _____

Property Owner(s) type of Business Association and General Partner(s), if applicable:

4. Prior Owner/Operator at site since December 31, 1983 (Attach additional sheets if necessary.)

THIS INFORMATION MUST BE COMPLETED

Name (Identify as Operator or Owner)

Dates of Ownership/Operation

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5. Party(ies) Agreeing to be responsible under the Remediation Agreement
(Attach additional sheets if more than one.)

Name _____ Telephone #() _____

Firm _____

Street Address _____

Municipality _____ State _____ Zip _____

Code _____

State of Incorporation, if applicable:

Type of Partnership and General Partner(s), if applicable:

Designate lead party responsible for Remediation Agreement where multiple parties

are proposed: _____

6. **Describe IN DETAIL the ISRA subject transaction for which this Remediation Agreement is requested. Please include the status of the operations (continuing or ceasing) and the identity of the property owner and operator upon completion of the transaction. (Attach additional sheets, if necessary.)**

7. **Purchaser or New Lessee:**

Name _____ Telephone # () _____

Firm _____

Street Address _____

Municipality _____ State _____ Zip Code _____

State of incorporation, if applicable: _____

Type of Business Association and General Partner(S), if applicable:

8. **Attach a detailed cost estimate for remediation of the industrial establishment(s).**

9. **Have there been any previous ISRA/ECRA Remediation Agreements/Administrative Consent Orders executed for this Industrial Establishment or another Industrial establishment, which occupied the same tax block and lot number? (Attach additional sheets if more than one industrial establishment is included in this application.)**

_____ Yes _____ No

If Yes, Name of Industrial Establishment _____

ISRA/ECRA Case No. _____ Date Submitted _____

Ordered/Responsible Party: _____

Current Status: _____ Current Case Manager: _____

Has this Industrial Establishment received a No Further Action Letter or Negative Declaration Approval ?
_____ Yes (please provide copy) _____ No

10. Is this request for an amendment to the existing Remediation Agreement/Administrative Consent Order?

_____ Yes _____ No

11. Circle the type of remediation funding source, other than a Self-Guarantee*, to be submitted in an amount equal to the estimated cost of remediation:

Line of Credit

Environmental Insurance Policy

Remediation Trust Fund

***NOTE: If the type of remediation funding source chosen is a Self-Guarantee it must be submitted with this application for a Remediation Agreement in accordance with N.J.A.C. 7:26C-7.**

12. Individual/Agent submitting this request for a Remediation Agreement:

Name _____ Telephone #() _____

Firm _____

Street Address _____

Municipality _____ State _____ Zip code _____

13. AUTHORIZATIONS/CERTIFICATIONS:

A. Owner or Operator Statutory Liability:

1. I hereby certify that I am fully aware of the requirements of the Industrial Site Recovery Act, N.J.S.A. 13:1K-1 et seq., as it pertains to the remediation of the industrial establishment subject to this remediation agreement. Specifically, I am fully aware of the responsibilities of the owner or operator of the industrial establishment to remediate the site in accordance with ISRA and this chapter. I acknowledge that a remediation agreement has been requested to allow the transaction referenced in the remediation agreement application to proceed prior to completion of all ISRA compliance requirements and that the person entering into the remediation agreement is agreeing to comply with all ISRA requirements. I further acknowledge that the execution of a remediation agreement shall not release [Person] from any responsibilities [Person] have pursuant to ISRA and this chapter.

Typed/Printed Name _____ Title _____

Signature _____ Date _____

Sworn to and Subscribed Before Me on this _____ Date of _____ 20 _____

Notary _____

2. I hereby certify that I acknowledge that the transaction and industrial establishment that are the subject of this remediation agreement is a transfer of ownership or operations of an industrial establishment as defined by ISRA and N.J.A.C. 7:26B. I further acknowledge that [Person] is subject to penalties for violations of ISRA and N.J.A.C. 7:26B. I am fully aware of [Person's] responsibilities to allow the Department access to the subject industrial establishment and of the requirements to prepare and submit any documents relevant to the remediation of the subject industrial establishment as required by the Department.

Typed/Printed Name _____ Title _____

Signature _____ Date _____

Sworn to and Subscribed Before Me on this _____ Date of _____ 20 _____

Notary _____

3. I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, To the best of my knowledge the submitted information is true, accurate and complete. I am aware that there are significant civil penalties for knowingly submitting false, inaccurate or incomplete information and that I am committing a crime of the fourth degree if I make a written false statement which I do not believe to be true. I am also aware that if I knowingly direct or authorize the violation of N.J.S.A. 13:1K-6 et seq., I am personally liable for the penalties set forth at N.J.S.A. 13:1K-13.

Typed/Printed Name _____ Title _____

Signature _____ Date _____

Sworn to and Subscribed Before Me on this _____ Date of _____ 20 _____

Notary _____

ISRA-012
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B. Transferee or New Lessee Certification:

I hereby certify that [Person] is the transferee and/or new lessee of the industrial establishment subject to this remediation agreement. I have read this application and am aware of the requirements and conditions of ISRA and the remediation agreement. [Person] expressly agrees to allow the Department, seller, previous owner, previous operator, any other person subject to the remediation agreement, and any of their respective agents or assignees the right to enter the industrial establishment after the ISRA-subject transaction has taken place and/or the lease has been executed for completion of the remediation of the industrial establishment. Additionally, I acknowledge and understand that if a remedial action is warranted at the subject industrial establishment, institutional controls and engineering controls as defined in ISRA, N.J.S.A. 58:10B-1 et seq., N.J.A.C. 7:26C, N.J.A.C. 7:26E and N.J.A.C. 7:26B may be necessary at the industrial establishment.

Typed/Printed Name _____ Title _____

Signature _____ Date _____

Sworn to and Subscribed Before Me on this _____

Date of _____ 20 _____

Notary _____

Notary